

NORTHEAST PEDIATRIC
CLINIC P.A.

4520 Centerville Rd.
Vadnais Heights, MN 55127
Phone 651 - 426 -1141
Fax 651 - 426 -1705

**PEDIATRIC HANDBOOK
FOR PARENTS**

We are happy to welcome your family to Northeast Pediatric Clinic. We provide primary pediatric care to children from birth to age 21 years. As pediatricians, it is our goal to provide the highest quality of health care for your children. The information in this booklet is meant to provide some basic clinic information as well as to answer some common pediatric questions. Our staff is available to answer questions not contained in this booklet and we always welcome comments on how we can improve our service to you.

Office Hours

The clinic is open:

Tues., Wed. and Fri. from 8 a.m. to 6 p.m.

Mon., and Thurs. from 8 a.m. to 8 p.m.

In addition, we hold a Saturday morning clinic for children with acute illnesses from approximately 9 a.m. to 11 a.m., hours vary dependent on need and appointments are scheduled as calls are received. The clinic is closed on major holidays. There will be a notice posted approximately 30 days in advance of any special holiday hours.

Clinic hours are by appointment to best meet the needs of our patients. We encourage you to keep your appointment on time. We ask that you call to cancel an appointment as soon as possible,

preferably at least 2 hours notice, this allows another patient to be seen - maybe your child. We will notify you of a missed appointment by postcard. Our office policy is one missed appointment per calendar year at no charge. We understand that emergencies, severe weather etc. may occur and prevent a parent from calling and we do not penalize people for these situations.

Location

Northeast Pediatric Clinic is located at the corner of Centerville Rd and Highway 96 in the lower level of the NE Medical Dental building. Directions: 35E North, exit Highway 96, go West on 96 to Centerville Rd., turn South on Centerville.

Appointments

A receptionist is available to schedule appointments after **7:30 a.m.** weekdays and after **8:30 a.m.** on Saturdays. Since most of our appointments are scheduled for the same day of the visit, we encourage you to schedule well child exams and routine visits well in advance. Well child exams are scheduled on the hour, the last one an hour before closing. We do not do well child exams on Saturdays, nor do we schedule Saturdays in advance.

Schedule school and sports physicals during the spring and summer to avoid the last minute back to school rush. We are typically very busy the two weeks before and after school starts so it may be difficult to get an appointment then.

We try to maintain our schedule and see your child at their scheduled time. We know it can be difficult waiting with a sick child. You can help by arriving on time for your appointment. Also when calling for an appointment, please be specific when describing what your child will be seen for; we schedule different amounts of time for different problems. Please make an appointment for each child you wish to be seen, bringing additional patients to a single appointment is one of the key reasons for physicians to get behind schedule.

Allergy shot administration and walk - in labs do not require an appointment. However, it is a good idea to call ahead so the paperwork and chart can be ready. Scheduled patients take priority over walk-ins and may require a short wait if the clinic is busy. The latest these procedures will be done is 30 minutes before the clinic closes.

Patients receiving allergy shots are reminded that they must stay in the clinic for 30 minutes after their shot to be sure there is no adverse reaction. After 30 minutes a staff member will check the site and approve the patient to leave.

Occasionally, parents ask if they can have a lab such as a throat culture or vaccination performed on themselves. Because we are not authorized by insurance providers to provide primary care to adults, we can not bill for these services. Adults who request this service for convenience must pay cash at the time of service and provide the name and phone number of their primary care physician. We will be

happy to provide a receipt that the parent can use to submit to their insurance provider for possible reimbursement. Test results will be faxed to their primary care physician for treatment and follow up in accordance with insurance and liability requirements.

Phone Calls

During office hours our triage staff will respond to phone calls within 30 to 60 minutes. Please be sure to give the receptionist all the information needed regarding your question. Triage staff must know the nature of the concern and have your child's medical record before returning your call. If there is a question that they can not answer, your message will be given to the appropriate physician who will call you back as time allows.

Non - emergency calls to physicians should be made during regular office hours including requests for prescription refills. Please do not wait until you are out before requesting a prescription refill, especially for Ritalin. They will try to return phone calls as soon as possible, no later than the end of the day depending on the urgency. Please be aware that a specific physician may be off the day you call and will not get your message until the next day or later depending on their schedule.

Our physicians rotate being on-call and answering after hour emergency phone calls on evenings and weekends. Calls to 651 - 426 -1141 are automatically sent to the on-call physician's pager and every effort is made to respond promptly. If you do not receive a call back within 30 minutes, please

call again in case the message did not go through properly the first time.
There is a small fee for after hour return phone calls from the on-call physician.

After 10 p.m. every evening, phone calls are answered by Children's Health Care Triage Service. Their staff of trained RNs will answer your questions, give you appropriate instruction or if needed page the on-call physician. All documentation of triage calls are faxed to us the next morning and given to the physician that was on - call.

Medical Records

Patient medical records are confidential and may be released to others only with your written consent. Our original record always remains the property of Northeast Pediatric Clinic. Should you move or change clinics we will transfer a copy of your records one time free of charge, subsequent requests for records will be charged a small fee to cover copying and mailing. By law we can only copy those records for care received at our clinic, you will need to contact previous medical facilities for other medical information.

Patient Information

Pursuant to Minnesota law, a minor patient has a right of confidentiality when they consent for treatment on their own. When an adolescent informs the health care provider that they want the visit to be confidential, we can not release any information on

that visit without the written permission from the minor. Parents are included in this restricted release.

Schools, daycares, camps etc., often have health and immunization forms to be filled out by your primary care physician. We request that you complete the form as much as possible before submitting it to us and provide a stamped, addressed envelope for the return. Please allow one week for the physician to complete and return.

Fees

Our fees are set consistent with the practice of pediatrics in the Twin City metro area, and are based on levels of care. We participate with most insurance providers, PPOs, Medical Assistance and Minnesota Care. We will file insurance claims for you for your convenience.

Please call and verify that we are providers under the plan should your insurance change. We do not provide free or sliding scale care for uninsured patients, should you need to use those services we would be happy to provide a list of resources. If you do not have insurance and are personally responsible for the charges, you will be expected to pay a portion of the charge at the time of service. If you have questions regarding; any specific service, fee, insurance or billing our billing office can help you M - F between 8 a.m. and 3 p.m.

At your first visit, we will make a copy of your insurance card and ask you to fill out new patient

information forms. Each visit you are asked to sign in at the front desk and to let us know of any address, phone number or insurance changes. Once a year, we ask everyone to fill out patient information forms to keep our files current.

Managed care plans require that the insurance subscriber designate a primary care clinic. This information is then printed on your insurance card. If Northeast Pediatric Clinic is not listed on your card and we can not verify that we are the designated primary care clinic, we will be unable to see your child.

Hospitals

Our physicians are on staff at Children's Hospitals and Clinics - St. Paul and see newborns at United, St. John's Northeast and St. Joseph Hospitals. Newborns delivered elsewhere will be seen by staff pediatricians at those hospitals. You should request that we be listed as your pediatrician and we will automatically be sent the hospital report in time for your first clinic visit.

Admissions

We admit patients to St. Paul Children's Hospital where all of our physicians are on staff. We have noted their exceptional care and concern for children and parents. Their emergency room is also our preference, the care is excellent and geared to children's needs. Our physicians weekly rotate rounding at SPCH and are there daily.

Because of their close location, some parents request St. John's Hospital and although we do not regularly admit sick children there, we do have some patients use their radiology, lab and emergency room services. Some health plans control what hospital subscribers may use even for these services so check with us first. At the present time all health plan providers that we are affiliated with include St. Paul Children's Hospital in their coverage.

Referrals

Our office provides referrals to specialists and will complete the necessary paperwork should your insurance require it. Check your insurance handbook for the approved procedure for referrals, it is possible that a specialist or hospital maybe in your provider book and yet we can't refer to them because of contractual agreements. Most plans control/restrict where you can go especially for chemical dependency and behavioral health issues.

Northeast Pediatric Clinic is a participant in the Children's Physician Hospital Organization (CPHO) network. The network provides referrals for: Choice Plus, Preferred One Community Health Plan, Ucare, Blue Cross Blue Shield and HealthPartners. Please check with us before scheduling an appointment if your insurance requires a referral. Remember you pediatrician will need to know what insurance you have when making a recommendation of who to see.

Adopted and Foster Children

Parents adopting a child must check the procedure for adding the child to their insurance before their first visit to us. Often insurance providers require copies of placement or custody forms before providing coverage. Coverage usually begins from the date of placement but may be delayed until the adoption is finalized in domestic adoptions. Children placed for adoption through a county program will be covered by medical assistance and their M.A. card must be brought to each visit. Newborns placed by a county program will have a complete physical before leaving the hospital and any medical follow up needed after discharge is done at the hospital where the delivery took place.

Foster children placed by the county will also have medical assistance coverage and will need to have their card at each visit.

Consent for Medical Care

Parents or legal guardians are authorized to give consent for medical care of a minor. In the case, where the parents are divorced the parent(s) with legal custody is authorized. If the parents have joint custody either parent can authorize treatment. We need to have a copy of the appropriate legal document on file to vary from this standard. If you are on vacation, unavailable etc. and have someone you have authorized bring your child to the clinic, we need a written statement from you authorizing them to make treatment decisions on your behalf.

Foster parents are not authorized to consent to anything except routine medical care. They are

provided court documents that detail their authority for medical care.

In all cases, emergency treatment can be given without consent if the parent(s) or legal guardian are not available to give consent.

Routine Health Care - Well Child Checks

It is important for us to see your child on a regular basis to evaluate their growth and development. Conducting a well child check while the child is healthy allows us to provide preventive services such as vaccinations. As part of the Children's Physician Hospital Organization we recommend 18 well child visits at the following times:

1 to 2 weeks after birth, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months, 18 months, 2 years, 3 years, 4 years, 5 years, 7 years, 9 years, 11-12 years, 13-14 years, 15-16 years and 17-18 years old.

Insurance providers vary greatly in the number of well child visits they will cover, if that is a concern please check with them for their coverage schedule. We base our recommendation on optimum preventive medical care.

Immunizations

Routine vaccinations of infants and children is extremely important. Regardless of the small potential of adverse reaction to these immunizations, the benefits far outweigh the risks. Your pediatrician will discuss the various vaccines with you and you will be given a VIM, Vaccine Information Material sheet with each vaccination given. Ongoing vaccine research has produced new and better products. We follow the Minnesota Health Department, Center for Disease Control and the American Academy of Pediatrics recommendations for administration.

Some of the new vaccines on the market are targeted for a particular age or risk group.

Please be aware that in Minnesota, children starting kindergarten as of the year 2000 must have completed the Hepatitis B series and children starting 7th grade in 2002 must have had the series. Because schools require immunization documentation before admission to these grades, please be sure your child is current with their immunizations in advance.

Usual reactions to immunizations may include fever (101 to 103), fussiness, or redness and swelling at the site of the injection. Each VIM sheet will discuss possible reactions. If you have individual concerns regarding previous reactions to immunizations these should be discussed with your physician prior to receiving repeat immunizations. Reactions to inform the clinic immediately include; fever to 105, inconsolability, and seizures. Should your child have this type of reaction, call the clinic immediately for evaluation.

We follow the most current Minnesota Department of Health child immunization schedule which is current as of 3/99. If you have questions, check with us to see if there has been an update since this publication.

The most current Minnesota Department of Health Immunization schedule is available at our front desk. If you would like a copy or have questions, check with us for interpretation.

Acetaminophen and Ibuprofen

Acetaminophen (Tylenol, Tempra, Panadol, Liquiprin and generics) and Ibuprofen (Motrin, Advil, and generics) are two over the counter medications that are helpful in reducing pain and discomfort in children and adolescents. They may also have the effect of reducing the discomfort associated with fever. When using these products we recommend you use them to relieve the discomfort not to treat the fever.

If your child is less than three months old, do not treat a fever without talking to your provider first.

For infants and toddlers dosage is dependent on weight. We have provided two charts for you to determine dosage - **it is extremely important that you give the dose based on the type of product, i.e. drops, tablets, suspension, chewable or caplets. Study the container carefully to determine the mg. per dose and follow the dose for that product based on weight.**

<scan Acetaminophen and Ibuprofen charts>

Tobacco Exposure

Secondhand smoke has been proven to be detrimental to the health of children. Infants in particular have shown a higher incidence of otitis media (ear infections) if routine exposure to smoke occurs. As part of our Well Child visits we will ask about secondhand smoke exposure and for older children their use of tobacco products. Our physicians will provide counseling materials/ resource information for parents interested in quitting smoking.

Safety

Safety plays a major role in the nurturing of infants through childhood and beyond. Preparation and prevention are the two best ways to avoid unexpected accidents.

Safety Checklist

1. Always use a car seat for children under 4 years old. Be sure to follow manufacturer's instructions for proper installation. Children under age 10 should not be restrained in the front seat of a car with passenger airbags. Older children should always use seat belts when riding in a car.
2. Have your health care provider's phone number in a convenient place for everyone to find. Our number is 651-426-1141.
3. Use child locks on doors and cabinets that contain soaps, liquids, cleaning fluids, and medicines to keep them away from young children.

4. Never leave your baby unattended on top of a changing table, bed or counter, or sitting in an infant seat on top of a table.
5. Cover or insulate hot radiators or pipes.
6. Put plug caps into unused electrical outlets. Limit access to electrical or phone cords by securing them up and away.
7. Use gates at stairways and other risk areas to keep the child from falling.
8. Secure high windows to keep children from leaning over and falling out.
9. Set your hot water heater to 125 degrees. To test turn your faucet to hot only and let it run, measure the peak temperature to be sure. Always check the temperature of bath water before placing an infant in it.
10. Never leave a preschool child or younger unattended in the tub. Always attend to children when near water and don't let them swim alone.
11. Keep matches and other combustibles out of reach of children. Dispose of combustible litter in places such as the garage, attic and basement. Use flame retardant fabrics for children's clothing and home furnishings. Have smoke alarms installed on all levels and near bedrooms.
12. Keep small objects such as pins, and buttons that could be swallowed, away from children under 3 years. Follow manufacturer's warnings for swallowing hazards. Anything less than a quarter in size is a potential swallowing hazard for a young child.
13. Insist on the use of bike helmets for all ages of children when biking, roller blading, skiing, horseback riding or skate boarding. Set the example by using one yourself.

14. All children over the age of 6 months should wear sunscreen with a SPF of 15 or greater for both UVA and UVB rays. Use hats and sunglasses to protect the eyes, and head. Children should avoid excessive sun exposure especially between 11 a.m. and 2 p.m.
15. We do not recommend the use of walkers as they may tip or roll down stairwells.
16. Do not tie pacifiers around a baby's neck or allow them to wear necklaces. Be aware of cords, ribbons or other items placed around the neck that could get caught and choke a child.
17. Although most household pets are normally not a problem, use caution when an infant or child is around them, especially a newborn. Children need to be taught how to approach animals that are not familiar to them.
18. Practice prevention in your home by teaching older children how to dial 911, conducting fire drills, phone and door answering. Parents should consider taking a CPR class that includes upper airway obstruction.
19. Lock up **all** firearms. Store the ammunition separately. Teach your child not to play at a friend's house where guns and other weapons are not secure.

Poison Control

Many common household items such as mouthwash, plants, cosmetics, vitamins can be toxic to a child if eaten. Keep them out of reach or locked up. Accidents do occur and timeliness is important, keep poison control numbers by or on all phones in the

house. Teach your child about Mr. Yuk and place Mr. Yuk stickers on hazardous items.

Hennepin County Poison Control - 341- 3141
Ramsey County Poison Control - 1-800-222-1222

Minnesota Poison Control System - 1-800-764-7661 or 1-800-POISON 1

Every household should have Syrup of Ipecac on hand. This medicine induces vomiting, and is only to be used if directed to do so by Poison Control. After you have called Poison Control and they have recommended using Syrup of Ipecac, give your child a glass or two of water (the medicine works best on a full stomach). The dose of Ipecac is 15 milliliters or 3 teaspoons. If no vomiting occurs after 30 minutes, repeat the dose.

After initial treatment, follow up with us as recommended by either Poison Control or the emergency room if you were directed there.

Newborns

Many parents are understandably anxious when first home from the hospital with their newborn. Common concerns include what is “normal” for sleeping, eating, crying and bowel movements. Although, we have provided some general information here, remember every child is unique and you will learn what is normal for your child.

Sleeping - newborns spend most of their time sleeping and vary in the amount of sleep required.

Anywhere from 10 to 20 hours per day can be normal. Babies usually do not sleep through the night at first, this is usually achieved around 6 months of age or 12-14 pounds.

Eating - infants should be given breast milk or formula for the first 12 months of life. A newborn will probably drink only 1/2 ounce to 1 ounce per feeding and gradually increase. Initial feeding times will range between 2 and 3 hours and extend to 4 to 6 hours as baby grows. Babies usually reach their maximum intake of breast milk or formula at six months. Your physician will discuss nutrition and adding solids at Well Child visits.

Crying - crying is a baby's earliest form of communication. After a few weeks you will learn to interpret your child's various cries. Crying varies from child to child dependent on temperament and physical make up. The average baby cries about 2 to 4 hours per day.

Bowel Movements - bowel movement patterns vary from baby to baby. Many babies do not have a stool for two to three days after coming home from the hospital. This is normal. The type of intake will determine the consistency and color of the stool. Any baby may range in having stools from after every feeding to every two to three days. Frequent changes in color, consistency and frequency are normal in the first year of life.

